

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 17, 2004 8:00 am**  
**Secretary of State**

03-17-2004 90017 038 \*\*\*\*61.25

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                          |                                                                                            |                                                                                                                                                                                                                              |                                                                                                        |                                                                              |
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| <b>DOCUMENT # N93000001649</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                          |                                                                                            |                                                                                                                                                                                                                              |                                                                                                        |                                                                              |
| <b>1. Entity Name</b><br><b>COMMUNITY CHURCH DEVELOPMENT CORPORATION</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                          |                                                                                            |                                                                                                                                                                                                                              |                                                                                                        |                                                                              |
| <b>Principal Place of Business</b><br>16990 SW 216 ST.<br>GOULDS, FL 33170 US                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                          |                                                                                            | <b>Mailing Address</b><br>16990 SW 216 ST.<br>GOULDS, FL 33170 US                                                                                                                                                            |                                                                                                        |                                                                              |
| <b>2. Principal Place of Business</b><br>16990 S.W. 216 <sup>th</sup> St.<br>Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                          | <b>3. Mailing Address</b><br>16990 S.W. 216 <sup>th</sup> St.<br>Suite, Apt. #, etc.       |                                                                                                                                                                                                                              |                                                                                                        |                                                                              |
| <b>City &amp; State</b><br>Miami, FL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                          | <b>City &amp; State</b><br>Miami, FL                                                       |                                                                                                                                                                                                                              | <b>4. FEI Number</b><br>85-0411305                                                                     |                                                                              |
| <b>Zip</b><br>33170                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                          | <b>Country</b><br>U.S.A.                                                                   |                                                                                                                                                                                                                              | <b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b> |                                                                              |
| <b>6. Name and Address of Current Registered Agent</b><br>BERNECKER, DONALD<br>16990 SW 216 ST<br>GOULDS, FL 33170                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                          |                                                                                            | <b>7. Name and Address of New Registered Agent</b><br>Name: <u>Bernecker, Donald</u><br>Street Address (P.O. Box Number is Not Acceptable): <u>16990 S.W. 216 St.</u><br>City: <u>Miami</u> <b>FL</b> Zip Code: <u>33170</u> |                                                                                                        |                                                                              |
| <b>8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.</b>                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                          |                                                                                            |                                                                                                                                                                                                                              |                                                                                                        |                                                                              |
| SIGNATURE: <u>Donald Bernecker</u> <i>Donald L Bernecker</i> <u>3/15/04</u><br><small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                          |                                                                                            |                                                                                                                                                                                                                              |                                                                                                        |                                                                              |
| <b>Filing Fee is \$61.25</b><br><b>Due by May 1, 2004</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                          | <b>9. Election Campaign Financing</b><br>Trust Fund Contribution. <input type="checkbox"/> |                                                                                                                                                                                                                              | <b>\$5.00 May Be Added to Fees</b>                                                                     |                                                                              |
| <b>Make check payable to Florida Department of State</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                          |                                                                                            |                                                                                                                                                                                                                              |                                                                                                        |                                                                              |
| <b>10. OFFICERS AND DIRECTORS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                          |                                                                                            | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>                                                                                                                                                                 |                                                                                                        |                                                                              |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>D</b><br><b>BERNECKER, DONALD</b><br>16990 SW 216 ST<br>GOULDS, FL    | <input type="checkbox"/> Delete                                                            | <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b>                                                                                                                                                   | <b>D</b><br><b>Bernecker, Donald</b><br>16990 S.W. 216 St.<br>Miami, FL 33170                          | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>D</b><br><b>BENSON, DALE</b><br>17275 SW 266 ST<br>HOMESTEAD, FL      | <input type="checkbox"/> Delete                                                            | <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b>                                                                                                                                                   | <b>D</b><br><b>Benson, Dale</b><br>225 Eric Drive<br>Naples, FL 34110                                  | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>D</b><br><b>BENSON, LUKE</b><br>17275 SW 266TH ST<br>HOMESTEAD, FL    | <input type="checkbox"/> Delete                                                            | <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b>                                                                                                                                                   | <b>D</b><br><b>Benson, Luke</b><br>21005 S.W. 232-St.<br>Miami, FL 33187                               | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>D</b><br><b>BERNECKER, ROBERT</b><br>16961 SW 276 ST<br>HOMESTEAD, FL | <input type="checkbox"/> Delete                                                            | <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b>                                                                                                                                                   | <b>D</b><br><b>Bernecker, Robert</b><br>16961 S.W. 276 St.<br>Homestead, FL 33031                      | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> Delete                                          | <input type="checkbox"/> Delete                                                            | <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b>                                                                                                                                                   | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                      | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> Delete                                          | <input type="checkbox"/> Delete                                                            | <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b>                                                                                                                                                   | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                      | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| <b>12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.</b> |                                                                          |                                                                                            |                                                                                                                                                                                                                              |                                                                                                        |                                                                              |
| <b>SIGNATURE:</b> <u>Donald Bernecker</u> <i>Donald Bernecker</i> <u>3/9/04</u><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                          |                                                                                            |                                                                                                                                                                                                                              |                                                                                                        |                                                                              |